

**ADAMS EVANS P.A.**  
INTELLECTUAL PROPERTY ATTORNEYS2180 Two Wachovia Center  
301 South Tryon Street  
Charlotte, North Carolina 28282-1991  
Telephone: (704) 375-9249  
Facsimile: (704) 375-0729W. THAD ADAMS, III  
J. SCOTT EVANS  
STEPHEN S. ASHLEY, JR.  
MATTHEW J. LADENHEIM  
JONATHAN M. HINES  
BRANDON C. TREGO**RECEIVED**  
**CENTRAL FAX CENTER****APR 20 2005**PATENT'S  
TRADEMARKS  
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UNFAIR COMPETITION  
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INTERNET LAW**FACSIMILE TRANSMISSION**

TO: Examiner Creighton H. Smith FROM: Jonathan M. Hines  
Art Unit 2645 Reg. No. 44,764

DATE: April 20, 2005 FAX NO: (703) 872-9306

RE: Our File No. 2548/1A; U.S. Serial No. 10/675,775

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CONFIRMATION COPY	YES	NO	✓
TO FOLLOW:			

NUMBER OF PAGES Cover + 14

**MESSAGE:** Please see the attached Amendment for U.S. Serial No. 10/675,775 filed in reply to Office Action dated January 25, 2005.

Also, please confirm receipt of this facsimile. Thank you.

If any problems in transmission occur, please contact Kris Pierce, Legal Assistant

[Acct. Code 2181]

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PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages In This Submission


15

Application Number	10/675,776
Filing Date	09-30-2003
First Named Inventor	GILL
Art Unit	2845
Examiner Name	SMITH, C.
Attorney Docket Number	2548/1A

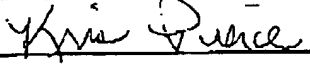
**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): . Statement Under 37 CFR 3.73(b); . Copy of Assignment & Notice of Recordation; and . Facsimile Cover Sheet
<b>Remarks</b> Please charge any additional fees to Deposit Account No. 01-0265.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	ADAMS EVANS P.A.		
Signature			
Printed name	Jonathan M. Hines		
Date	April 20, 2005	Reg. No.	44,764

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Kris Pierce	Date	April 20, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/09/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL**  
**For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 65.00

**Complete if Known**

Application Number	10/675,775
Filing Date	09-30-2003
First Named Inventor	GILL
Examiner Name	SMITH, C.
Art Unit	2645
Attorney Docket No.	2548/1A

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 01-0265 Deposit Account Name: Adams Evans P.A.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☒ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	= _____	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimer Fee - \$65.00 (small entity) Code 2814

Fees Paid (\$)

65.00

**SUBMITTED BY**

Signature	<i>Jonathan M. Hines</i>	Registration No. (Attorney/Agent)	44,764	Telephone (704) 375-9249
Name (Print/Type)	Jonathan M. Hines	Date	April 20, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**RECEIVED  
CENTRAL FAX CENTER****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****APR 20 2005**

Appl. No. : 10/675,775 Confirmation No. 6261  
Applicant : Gill  
Filed : September 30, 2003  
TC/AU : 2645  
Examiner : C. Smith

Docket No. : 2548/1A  
Customer No. : 23638

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Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE**

Sir:

This is in response to the Office Action of January 25, 2005.

**Amendments to the Specification** are not being submitted at this time.

**Amendments to the Claims** are not being submitted at this time.

**Amendments to the Drawings** are not being submitted at this time.

**Remarks** begin on page 4 of this paper.